

STATE OF HAWAII  
DEPARTMENT OF TAXATION  
**NOTIFICATION OF CANCELLATION  
OF GENERAL EXCISE, WITHHOLDING,  
TRANSIENT ACCOMMODATIONS, OR  
RENTAL MOTOR VEHICLE AND  
TOUR VEHICLE ACCOUNTS**

DO NOT WRITE IN THIS AREA

**01**

NAME: \_\_\_\_\_

GE/WH/TA/RV ID. NO. \_\_\_\_\_

## CANCEL THE FOLLOWING:

☐ ALL MY ACCOUNTS, AS OF \_\_\_\_\_  
MO DAY YR

OR THE SPECIFIC ACCOUNT(S) CHECKED OFF BELOW:

☐ MY GENERAL EXCISE, AS OF \_\_\_\_\_  
MO DAY YR

☐ MY WITHHOLDING, AS OF \_\_\_\_\_  
MO DAY YR

☐ MY TRANSIENT ACCOMMODATIONS, AS OF \_\_\_\_\_  
MO DAY YR

☐ MY RENTAL MOTOR VEHICLE AND  
TOUR VEHICLE, AS OF \_\_\_\_\_  
MO DAY YR

## NOTE:

The tax license being cancelled must be returned to the Department of Taxation together with this cancellation form. Be sure to file your monthly, quarterly, or semiannual returns up to the date of cancellation and the annual return by their due dates.

THIS SPACE FOR DATE RECEIVED STAMP

Please sign below. An unsigned cancellation notice will not be accepted.

\_\_\_\_\_  
Signature of Owner, Partner, Officer, or Agent

\_\_\_\_\_  
Title: Owner, Partner, Officer, or Agent

\_\_\_\_\_  
Date

### — MAILING ADDRESSES —

OAHU DISTRICT OFFICE  
P.O. BOX 1425  
HONOLULU, HI 96806-1425

MAUI DISTRICT OFFICE  
P.O. BOX 1427  
WAILUKU, HI 96793-6427

HAWAII DISTRICT OFFICE  
P.O. BOX 937  
HILO, HI 96721-0937

KAUAI DISTRICT OFFICE  
P.O. BOX 1687  
LIHUE, HI 96766-5687